

**PRINTER RUSH**  
**(PTO ASSISTANCE)**

Application :	Examiner :	GAU :
10/083,915	Bosenbaum	3725
From:	Location:	Date:
cwc	(DC) FMF FDC	11/30/04
Tracking #:		Week Date:
06025353		10-18-04

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	6-4-04	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE:

Claim 2 (original 10) depends on canceled claim  
 thank you

[XRUSH] RESPONSE:

Corrected

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04